

## FAX COVER SHEET

**The Law Office of Thomas M. Isaacson**  
**850 Lindy Lane**  
**Huntingtown, MD 20639**  
**Phone: (410) 414-3056**  
**Fascimile: (410) 510-1433**

**E-mail: tmi@tamilaw.com**  
**Web: www.tamilaw.com**

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To Fascimile Number: 17038729306

Attention: Man Phan

Company: USPTO

Re: App. No. 09/781,445; Docket No.: 112063CIP

Cover Message:

Dear Sirs:

Please find attached a Response in the  
above-referenced case.

Respectfully submitted,

Thomas M. Isaacson

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PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/781,445
	Filing Date	Feb 13, 2001
	First Named Inventor	Jack Winters
	Art Unit	2665
	Examiner Name	Thomas Volper <i>Man Phan</i>
Total Number of Pages in This Submission	Attorney Docket Number	112063CIP

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney; Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks:		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Thomas M. Isaacson, Reg. No. 44166		
Signature	<i>Thomas M. Isaacson</i>		
Date	April 14, 2005		

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Thomas M. Isaacson		
Signature	<i>Thomas M. Isaacson</i>	Date	April 14, 2005

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Application/Control Number: 09/781,445  
Art Unit: 2664

Docket No.: 112063CIP

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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In re Application of: :  
: :  
Jack H. Winters : Attorney Ref.: 112063CIP  
: :  
Serial No.: 09/781,445 : Confirmation No.: 9556  
: :  
Filed: February 13, 2001 : Art Unit: 2665  
: :  
FOR: SYSTEM AND METHOD FOR : Examiner: Thomas E. Volper  
SELECTING A TRANSMISSION :  
CHANNEL IN A WIRELESS :  
COMMUNICATION SYSTEM :  
THAT INCLUDES AN ADAPTIVE :  
ANTENNA ARRAY :

**RESPONSE**

**MAIL STOP: Amendment  
Commissioner for Patents  
Patent & Trademark Office  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Dear Sir:

Responsive to the communication dated January 18, 2005, kindly consider the following  
Remarks, which being on page 2 of this Response.